Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main

| | | DUCUIII | THE FAUCTOLAG | |
|---|--------------------------|--------------------|---------------|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Andrew Drohan 1 | odd | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Janet Lea Todd | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT C | F VIRGINIA | |
| Case number | 16-30015 | | | |
| (if known) | | | | |
| | | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | | assets of what you own |
|----------------|--|------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 993,862.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 287,602.40 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 1,281,464.40 |
| Pa | rt 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 1,403,930.54 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 538,478.83 |
| | Your total liabilities | \$ | 1,942,409.37 |
| Pa | rt 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 7,932.75 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 10,002.00 |
| | rt 4: Answer These Questions for Administrative and Statistical Records | | |
| Pa | | | |
| | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other s | chedules. |
| Pa 6. 7. | | ur other s | chedules. |
| 6. | □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo■ Yes | | |

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| Debtor 1 | Andrew Drohan Todo |
|----------|--------------------|
| Debtor 2 | Janet I ea Todd |

Case number (if known) 16-30015

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

| \$ | | | |
|----|--|--|--|
| | | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | tal claim |
|--|-----|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | Case | 10-30013-10 | IXII DOC IC | | cument Page 3 of 44 | 23/10 17 | 34.33 | Desci | viaiii |
|--------------|--------------------|------------------------|----------------------------------|-----------|---|---------------|------------------------------|-------------|----------------------------------|
| Fill | in this inform | nation to identify | y your case and th | | | | | | |
| Deb | otor 1 | Andrew Dro | han Todd | | | | | | |
| | | First Name | | Name | Last Name | | | | |
| Deb | otor 2 | Janet Lea T | odd | | | | | | |
| (Spot | use, if filing) | First Name | Middle | Name | Last Name | | | | |
| Unit | ted States Bar | kruptcy Court fo | r the: EASTERN | DISTR | ICT OF VIRGINIA | | | | |
| Cas | e number 1 | 6-30015 | | | | | | | ck if this is an ended filing |
| Sc n ead | chedule | | roperty escribe items. List a | | only once. If an asset fits in more than one o | | | | |
| nore Part | space is neede | ed, attach a separa | ate sheet to this form | n. On the | ed people are filing together, both are equally e top of any additional pages, write your nam Estate You Own or Have an Interest In | e and case nu | mber (if know | n). Answei | every question |
| . Do | o you own or ha | ve any legal or eq | uitable interest in ar | ny reside | ence, building, land, or similar property? | | | | |
| | No. Go to Part | 2. | | | | | | | |
| _ | Yes. Where is | | | | | | | | |
| _ | res. Where is | the property: | | | | | | | |
| | | | | | | | | | |
| 1.1 | | | | Wha | t is the property? Check all that apply | | | | |
| | 12309 Cou | ntry Creek Wa | ıy | | Single-family home | Do not dodu | et cocurad ala | ime or oven | nptions. Put the |
| | Street address, if | available, or other de | scription | _ | Dunley or multi-unit building | | ny secured cla | | |
| | | | | | Condominium or cooperative | Creditors W | ho Have Clain | ns Secured | by Property. |
| | Glen Allen | VA | 23059-0000 | | • | Current val | | | value of the |
| | City | State | ZIP Code | | | • • • | 0,000.00 | | 810,000.00 |
| | 2, | | | | | | | | , |
| | | | | | | | | | hip interest entireties, or |
| | | | | wno | has an interest in the property? Check one Debtor 1 only | | by the Ent | irety | |
| | Henrico | | | | , | | | | |
| | County | | | | Debtor 1 and Debtor 2 only | | | | |
| | | | | | · | | if this is com tructions) | munity pro | perty |
| | | | | | r information you wish to add about this iten | (| , | | |
| | | | | | erty identification number: | , 500 40 100 | | | |

2015 Tax Assessment \$740,000

Appraised Value per SunTrust \$810,000

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| Debto Debto | | | odd | | | Case nur | mber (if known) 16- | 30015 |
|----------------|--|-----------------|------------------|------------|---|---------------|--|---|
| 1.2 | f you own or ha | ve more | than one, list h | | t is the property? Check all that apply | | | |
| 9 | 944 Ne-Ah-Ta-W | anta | | | Single-family home | Do | o not deduct secured cla | aims or exemptions. Put the |
| S | treet address, if available | e, or other des | scription | | Duplex or multi-unit building Condominium or cooperative | ar | mount of any secured cla | |
| 7 | Fraverse City | МІ | 49686-0000 | | | | urrent value of the ntire property? | Current value of the portion you own? |
| _ | City | State | ZIP Code | | | - | \$531,400.00 | \$175,362.00 |
| | | | | U Who | Timeshare Other | (s | escribe the nature of y | our ownership interest ancy by the entireties, or |
| | | | | Who | has an interest in the property? Check Debtor 1 only | K OHE | oint tenant | |
| (| Grand Traverse | | | | | | | |
| C | County | | | | | | | |
| | | | | | • | er 🗆 | Check if this is com (see instructions) | munity property |
| | | | | | r information you wish to add about the | this item, su | ch as local | |
| | | | | | Todd holds a 1/3 interest in t | this prope | ertv | |
| | | | | | higan Tax Assessment: \$531 | | o. cy | |
| 1.3 N U | If you own or have more than one, list h Marriott Time Share in St. Thomas USVI Street address, if available, or other description | | | | t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | ar | mount of any secured cla | aims or exemptions. Put the aims on Schedule D: ms Secured by Property. |
| | | | | | | | urrent value of the ntire property? | Current value of the portion you own? |
| | City | State | ZIP Code | | | Gi | \$5,000.00 | \$5,000.00 |
| | , | | | | Timeshare | | | |
| | | | | □ \//ba | | (s | | our ownership interest ancy by the entireties, or |
| | | | | Who | has an interest in the property? Check Debtor 1 only | K OHE | enants by the En | tiretv |
| | | | | | | | , | · - · • |
| | County | | | _ | Debtor 1 and Debtor 2 only | | | |
| | | | | | | er 🗆 | Check if this is com (see instructions) | munity property |
| | | | | Othe | r information you wish to add about the erty identification number: | | , | |
| | | | | Med App | lium Season - 1 Week promately annual expense for ptors value is based on comp | | | |

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| Debt | or 2 J a | anet Lea Todd | Case | e number (if known) 1 | 6-30015 |
|--------------|---------------------------------|--|--|---|---|
| | If you ov | vn or have more than one, I | | | |
| 1.4 | USVI | Time Share in St. Thomas | What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | amount of any secured | I claims or exemptions. Put the I claims on Schedule D: Claims Secured by Property. |
| _ | City | State ZIP Code | Manufactured or mobile home Land Investment property Timeshare Other | (such as fee simple, | of your ownership interest tenancy by the entireties, or |
| | | | Who has an interest in the property? Check one Debtor 1 only | a life estate), if know Tenants by the I | |
| - | County | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter property identification number: | (see instructions) | ommunity property |
| | | | Low Season - 1 Week Appromately annual expense for taxe Debtors value is based on comparabl | | |
| 2. A | Add the do | ollar value of the portion you ov have attached for Part 1. Write | wn for all of your entries from Part 1, including an that number here | y entries for | \$993,862.00 |
| ome s. Ca | one else d | | interest in any vehicles, whether they are register report it on Schedule G: Executory Contracts and Unhicles, motorcycles | | y vehicles you own that |
| 3.1 | Make: | Chevrolet | Who has an interest in the property? Check one | Do not deduct secure | d claims or exemptions. Put |
| 0.1 | Model: | Tahoe | Debtor 1 only | | cured claims on Schedule D: Claims Secured by Property. |
| | Year: Approxim Other info | 2008 ate mileage: 151,000 primation: | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | | ndition - Needs repairs - Husband | Check if this is community property (see instructions) | \$6,000.0 | \$6,000.00 |
| 3.2 | Make: Model: | Volvo XC60 | Who has an interest in the property? Check one ☐ Debtor 1 only | the amount of any sec | d claims or exemptions. Put tured claims on Schedule D: Claims Secured by Property. |
| | Year: | 2012 | Debtor 2 only | Current value of the | Current value of the |
| | Approxim Other info | ate mileage: 82,000 ormation: | ■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire property? | portion you own? |
| | | e Condition s - Husband and Wife | ☐ Check if this is community property (see instructions) | \$12,286.00 | \$12,286.00 |

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| Debto | _ | anet Lea Todd | | Case number (if known) | 16-30 | 015 |
|-------|-----------------|--|--|--|-----------------|--|
| 3.3 | Make: Model: | BMW 530l Series | Who has an interest in the property? Check one ■ Debtor 1 only | the amount of any | secured o | ns or exemptions. Put claims on Schedule D: Secured by Property. |
| | Year: | 2003 | Debtor 2 only | Current value of t | he | Current value of the |
| | | nate mileage: 157,000 | Debtor 1 and Debtor 2 only | entire property? | | portion you own? |
| | Other info | | At least one of the debtors and another | | | |
| | | ndition | | \$1,500 | 00 | \$1,500.00 |
| | Owner | - Husband | ☐ Check if this is community property (see instructions) | Ψ1,300 | | Ψ1,300.00 |
| 3.4 | Make: | Dodge | Who has an interest in the property? Check one | | | ns or exemptions. Put |
| | Model: | Sprinter | ■ Debtor 1 only | | | claims on Schedule D: Secured by Property. |
| | Year: | 2004 | Debtor 2 only | | | |
| | | ate mileage: 65,000 | Debtor 1 and Debtor 2 only | Current value of t entire property? | | Current value of the portion you own? |
| | Other info | | ☐ At least one of the debtors and another | onimo proporty : | | por mon you on |
| | | - Husband | At least one of the debtors and another | | | |
| | Owner | - Husballu | ☐ Check if this is community property (see instructions) | \$4,997 | .00 | \$4,997.00 |
| 4.1 | Yes Make: | Boston Whaler | Who has an interest in the property? Check one | | | ns or exemptions. Put |
| | | | ☐ Debtor 1 only | the amount of any | secured of | claims on Schedule D: |
| | Model: | 2004 | | Creditors who Hav | e Claims | Secured by Property. |
| | Year: | 2004 | Debtor 2 only | Current value of t | | Current value of the |
| | O | | Debtor 1 and Debtor 2 only | entire property? | | portion you own? |
| | Other info | | At least one of the debtors and another | ¢0.700 / | 00 | £0.700.00 |
| | trailer | 6 Ft. Boston Whaler with | ☐ Check if this is community property (see instructions) | <u>\$2,700.</u> | <u>JU</u> | \$2,700.00 |
| | ges you | | rn for all of your entries from Part 2, including that number here | | | \$27,483.00 |
| Оо ус | ou own o | r have any legal or equitable in | terest in any of the following items? | | po Do | urrent value of the ortion you own? o not deduct secured aims or exemptions. |
| Ex | | goods and furnishings Major appliances, furniture, linens | s, china, kitchenware | | | |
| _ | 163. DG | 301De | | | | |
| | | Household goo | ds and furnishings including antique clo | ck | | \$5,000.0 |
| Ex | i | Felevisions and radios; audio, vid ncluding cell phones, cameras, n | eo, stereo, and digital equipment; computers, prir nedia players, games | nters, scanners; music o | collectio | ns; electronic devices |
| | No Yes. De | scribe | | | | |
| Ex | amples: i | s of value Antiques and figurines; paintings, other collections, memorabilia, co | prints, or other artwork; books, pictures, or other illectibles | art objects; stamp, coin | ı, or bas | eball card collections |
| Ц | No | | | | | |

Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main Page 7 of 44 Document Debtor 1 **Andrew Drohan Todd** 16-30015 Debtor 2 Janet Lea Todd Case number (if known) Yes. Describe..... Family Heirlooms: Oriental Carpet \$500; Dining room furniture \$1,200.00 \$500 and Furniture/items made by Mrs. Todd's father \$200 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$750.00 Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... Wedding and Engagement Ring \$15,000.00 \$500.00 Family Heirlooms - Antique Pearl Necklace 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$22,450.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No

☐ Yes.....

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| Debtor 1 Debtor 2 | | | aa | | Case number (if known) | 16-30015 |
|----------------------|---------------|--|--|--|--|---------------------------|
| Exa | institutions. | | | ; certificates of deposit; shares the same institution, list each. | in credit unions, brokerage | houses, and other similar |
| □ No ■ Ye | S | | | Institution name: | | |
| | | 17.1. | Brokerage Account | UBS - Account currently | has a zero balance | \$0.00 |
| | | 17.2. | Checking Account | C & F Bank (Acct ending | 8884) | \$904.28 |
| | | 17.3. | Checking Account | C&F Bank (Acct ending 6 | 6722) | \$450.58 |
| | • | • | • | ge firms, money market accour | nts | |
| | S | | Institution or issuer name |) : | | |
| and No | joint venture | ormatior Na De To Rii Th wh ho Lii Rii the Ma pu su Te ho | a about them | pperation on 12-31-2015. Ing account at C&F Bank \$28,384.00. This entity Ist Kurt G. Abrahamsen, Ist Glenn, LLC f/k/a Hitech Ist Virginia Limited LLA, LLC f/k/a Grease Ist Glessolved Virginia Iny) entered 6-18-2014 for Ist Bank Bank Bank Bank Bank Bank Bank Bank | % of ownership: 100% Ownership Interest % | \$0.00 |
| | | in To fro es co | Icke Liquidating LLC odd receives approxim | ch closing is in | 3% Ownership | |

Official Form 106A/B Schedule A/B: Property page 6

Interest

remarketable.

Unknown

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Case number (if known) 16-30015

| | Supplies, LLC v filing date, 1-4- geared to sales business of The sale of point-of astablishment termal paper. S | 00% interest in Snap Office which began operating on the 2016. This new business is of office supplies. The former e Todd Venture Group was the sale supplies to retail including printer ribbon and start up of this entity required approximately \$10,000. | 100%% | \$1.00 |
|-----|---|---|-----------------------------------|-----------------------|
| | Government and corporate bonds and other Negotiable instruments include personal check Non-negotiable instruments are those you can ■ No □ Yes. Give specific information about them | s, cashiers' checks, promissory notes, and | money orders. | |
| | Issuer name: | | | |
| | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 40 rd □ No ■ Yes. List each account separately. | 1(k), 403(b), thrift savings accounts, or othe | er pension or profit-sharing plar | s |
| | Type of account: | Institution name: | | |
| | IRA | IRA Retirement through U0942) (Husband) | JBS (Acct ending | \$179,787.00 |
| | IRA | Roth IRA Retirement thro ending 8937)(Wife) | ugh UBS (Acct | \$29,376.00 |
| 22. | Security deposits and prepayments Your share of all unused deposits you have ma Examples: Agreements with landlords, prepaid No Yes | | | or others |
| 23. | Annuities (A contract for a periodic payment of | money to you, either for life or for a number | er of years) | |
| | ■ No □ Yes Issuer name and descripti | | , | |
| 24. | Interests in an education IRA, in an account i 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | n a qualified ABLE program, or under a | qualified state tuition progra | m. |
| | ☐ Yes Institution name and desc | ription. Separately file the records of any ir | nterests.11 U.S.C. § 521(c): | |
| | Trusts, equitable or future interests in prope ■ No | rty (other than anything listed in line 1), | and rights or powers exercis | able for your benefit |
| | ☐ Yes. Give specific information about them | | | |
| | Patents, copyrights, trademarks, trade secre Examples: Internet domain names, websites, p ■ No | | ments | |
| | ☐ Yes. Give specific information about them | | | |
| | Licenses, franchises, and other general intal Examples: Building permits, exclusive licenses ■ No | | censes, professional licenses | |
| | Yes. Give specific information about them | | | |
| Me | oney or property owed to you? | | | Current value of the |

Official Form 106A/B Schedule A/B: Property page 7

Debtor 2

Janet Lea Todd

portion you own?

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| Debtor 2 | Janet Lea Todd | | Case number (if known) | 16-30015 |
|----------------------------------|--|---|---|---|
| | | | | Do not deduct secured claims or exemptions. |
| | funds owed to you | | | |
| ■ No □ Yes. | . Give specific informa | ation about them, including whether you already filed | the returns and the tax years | |
| | . С. | | and totaline and the tan yearsiiiii | |
| 29. Family | | p sum alimony, spousal support, child support, main | tenance divorce settlement propert | v settlement |
| ■ No | , | | , | , |
| ☐ Yes. | . Give specific informa | ation | | |
| Exam _i □ No | benefits; unpaid | disability insurance payments, disability benefits, sick loans you made to someone else | s pay, vacation pay, workers' compe | ensation, Social Security |
| ■ Yes. | . Give specific inform | ation | | |
| | | Judgment awarded to The Todd V J. Todd and Janet L. Todd agains: Chesterfield County Circuit Court amount of \$ 6,277.00. The Debtor pursuing collection of this judgme Debtors can no longer afford fees collection. | t Kurt G. Abrahamsen by on 6-18-2014 for the s have been actively ent with no success, but | Unknown |
| | | collection. | | |
| <i>Exam</i> _l □ No | • | cies r, or life insurance; health savings account (HSA); cre company of each policy and list its value. Company name: | edit, homeowner's, or renter's insura Beneficiary: | nce Surrender or refund |
| | | сопрану паше. | Denenciary. | value: |
| | | Life Insurance through New York Life Insurance Comapny (Whole Life Policy) (Husband) | Janet Todd | \$5,694.76 |
| | | Life Insurance through Mass Mutual Financial Group (Universal Life 2060 Policy) (Wife) | Andrew J. Todd | \$772.47 |
| | | Life Insurance through Northwestern Mutual (Term Policy - Ending ***6754) | Janet L. Todd | \$0.00 |
| | | (Husband) | Janet L. Todd | φυ.υυ —————————————————————————————————— |
| | | Life Insurance through Northwestern Mutual (Whole Life Policy ending ***3744) (Husband) | Janet L. Todd | \$1,235.71 |
| | | Life Insurance through North Western Mutual (Whole Life Policy Ending ***3246) (Husband) | Janet L. Todd | \$1,101.39 |

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| Debtor 2 | Janet Lea Todd | | Case number (if known) | 16-30015 |
|---------------------|--|---|--|------------------------|
| | | Life Insurance through Northwestern Mutual (Whole Life Policy Ending ***3432) (Husband) | Janet L. Todd | \$196.21 |
| | | Life Insurance through Northwestern Mutual - Policy on the joint lives of wife's parents (ending in 4366) - Wife is one-third owner of policy with her siblings. Total cash value is appromately \$55,000, of which has a one-third interest (Wife) | Janet Todd and two siblings | \$18,150.00 |
| If you some | | at is due you from someone who has died a living trust, expect proceeds from a life insurance | policy, or are currently entitled to rec | ceive property because |
| ■ No □ Yes | . Give specific informa | ation | | |
| <i>Exam</i> ■ No | | es, whether or not you have filed a lawsuit or management disputes, insurance claims, or rights to sue | de a demand for payment | |
| _ | contingent and unlic | quidated claims of every nature, including count | erclaims of the debtor and rights t | o set off claims |
| ■ No □ Yes | s. Describe each claim | | | |
| ■ No | inancial assets you d Give specific informa | | | |
| | | Il of your entries from Part 4, including any entrients the suber here | | \$237,669.40 |
| Part 5: D | escribe Any Business-R | elated Property You Own or Have an Interest In. List any | real estate in Part 1. | |
| ■ No. G | own or have any legal of to Part 6. Go to line 38. | r equitable interest in any business-related property? | | |
| | | Commercial Fishing-Related Property You Own or Have a set in farmland, list it in Part 1. | an Interest In. | |
| ■ No | o. Go to Part 7. | egal or equitable interest in any farm- or commer | cial fishing-related property? | |
| ☐ Ye | es. Go to line 47. | | | |
| Part 7: | Describe All Property | y You Own or Have an Interest in That You Did Not List A | bove | |
| Exam | | y of any kind you did not already list? country club membership | | |
| ■ No □ Yes | s. Give specific informa | ation | | |
| 54. Add | the dollar value of al | ll of your entries from Part 7. Write that number I | nere | \$0.00 |

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| | tor 2 Janet Lea Todd | | Case number (if known) | 16-30015 |
|------|--|--------------|---------------------------|--------------------------|
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$993,862.00 |
| 56. | Part 2: Total vehicles, line 5 | \$27,483.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$22,450.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$237,669.40 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$287,602.40 | Copy personal property to | stal \$287,602.40 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$1,281,464.40 |

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| | | Docume | | |
|---------------------|--------------------------|--------------------|------------|--------------------------------------|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Andrew Drohan T | odd | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | EASTERN DISTRICT O | F VIRGINIA | |
| Case number | 16-30015 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| to t | he applicable statutory amount. | | | | |
|------|---|--------------------------------------|---------|---|---|
| Pa | rt 1: Identify the Property You Claim as E | xempt | | | |
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | |
| | ■ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.: | S.C. § 522(b)(3) | |
| | ☐ You are claiming federal exemptions. 11 U | J.S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| De | ebtor 1 Exemptions 12309 Country Creek Way Glen Allen, VA 23059 Henrico County | \$810,000.00 | • | \$1.00 | 11 USC 522(b)(3)(B); William v Peyton 104 F.3d 688 |
| | 2015 Tax Assessment \$740,000 Appraised Value per SunTrust \$810,000 Line from <i>Schedule A/B</i> : 1.1 | | | 100% of fair market value, up to any applicable statutory limit | Husband |
| | 944 Ne-Ah-Ta-Wanta Traverse City, MI 49686 Grand Traverse County | \$175,362.00 | | \$1.00 | Va. Code Ann. § 34-4 Husband |
| | Mr. Todd holds a 1/3 interest in this property Michigan Tax Assessment: \$531,400 Line from Schedule A/B: 1.2 | | | 100% of fair market value, up to any applicable statutory limit | nusballu |
| | 2008 Chevrolet Tahoe 151,000 miles Fair condition - Needs repairs | \$6,000.00 | | \$5,000.00 | Va. Code Ann. § 34-26(8) Husband |
| | Owner - Husband Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | riusbanu |
| | 2004 Dodge Sprinter 65,000 miles Owner - Husband | \$4,997.00 | | \$4,997.00 | Va. Code Ann. § 34-26(7) |
| | Line from Schedule A/B: 3.4 | | | 100% of fair market value, up to any applicable statutory limit | |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption | |
|--|--------------------------------------|--------|---|--------------------------------------|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| 2004 Dodge Sprinter 65,000 miles Owner - Husband | \$4,997.00 | | \$1.00 | Va. Code Ann. § 34-4 Husband | |
| Line from Schedule A/B: 3.4 | | | 100% of fair market value, up to any applicable statutory limit | nuosunu | |
| Household goods and furnishings including antique clock | \$5,000.00 | | \$2,500.00 | Va. Code Ann. § 34-26(4a) Husband | |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Wearing Apparel Line from Schedule A/B: 11.1 | \$750.00 | | \$300.00 | Va. Code Ann. § 34-26(4) | |
| | | | 100% of fair market value, up to any applicable statutory limit | | |
| Wedding and Engagement Ring Line from Schedule A/B: 12.1 | \$15,000.00 | | \$2,000.00 | Va. Code Ann. § 34-26(1a) | |
| Line from ochedate AVB. 1211 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Checking Account: C & F Bank (Accending 8884) | \$904.28 | | \$452.14 | Va. Code Ann. § 34-4 Husband | |
| Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | riusbanu | |
| Checking Account: C&F Bank (Acct ending 6722) | \$450.58 | | \$450.58 | Va. Code Ann. § 34-4 Husband | |
| Line from Schedule A/B: 17.3 | | | 100% of fair market value, up to any applicable statutory limit | nuosunu | |
| IRA: IRA Retirement through UBS (Acct ending 0942) (Husband) | \$179,787.00 | | \$179,787.00 | 11 U.S.C. §522(n) | |
| Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Life Insurance through Northwester Mutual (Whole Life Policy ending | n \$1,235.71 | | \$1,235.71 | Va. Code Ann. § 34-4 Husband | |
| ***3744) (Husband) Beneficiary: Janet L. Todd Line from Schedule A/B: 31.4 | | | 100% of fair market value, up to any applicable statutory limit | nuosunu | |
| Life Insurance through North Western Mutual (Whole Life Policy | \$1,101.39 | | \$1,101.39 | Va. Code Ann. § 34-4 Husband | |
| Ending ***3246) (Husband) Beneficiary: Janet L. Todd Line from <i>Schedule A/B</i> : 31.5 | | | 100% of fair market value, up to any applicable statutory limit | nusballu | |
| Life Insurance through Northwester Mutual (Whole Life Policy Ending | n \$196.21 | | \$196.21 | Va. Code Ann. § 34-4 Husband | |
| ***3432) (Husband) Beneficiary: Janet L. Todd Line from Schedule A/B: 31.6 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and ever ■ No □ Yes. Did you acquire the property cov □ No □ Yes | ry 3 years after that for c | ases f | | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|----------------|--------------------|-------------|--|---------------------|--|--|--|
| Debtor 1 | | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | Janet Lea Todd | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT C | DF VIRGINIA | | | | | |
| Case number | 16-30015 | | | | | | | |
| (if known) | | | | | Check if this is an | | | |
| | | | | | amended filing | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| to t | he applicable statutory amount. | | | | |
|------|---|--------------------------------------|---------|---|-------------------------------------|
| Pa | rt 1: Identify the Property You Claim as E | xempt | | | |
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | |
| | ■ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | ☐ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| De | ebtor 2 Exemptions 12309 Country Creek Way Glen Allen, | \$810,000.00 | | \$1.00 | 11 USC 522(b)(3)(B); William |
| | VA 23059 Henrico County 2015 Tax Assessment \$740,000 Appraised Value per SunTrust \$810,000 | | | 100% of fair market value, up to any applicable statutory limit | v Peyton 104 F.3d 688 Wife |
| | Line from Schedule A/B: 1.1 | | | | |
| | 2003 BMW 530I Series 157,000 miles Fair condition | \$1,500.00 | | \$500.00 | Va. Code Ann. § 34-26(8) Husband |
| | Owner - Husband Line from Schedule A/B: 3.3 | | | 100% of fair market value, up to any applicable statutory limit | naobana |
| | Household goods and furnishings including antique clock | \$5,000.00 | | \$2,500.00 | Va. Code Ann. § 34-26(4a) Wife |
| | Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Family Heirlooms: Oriental Carpet \$500; Dining room furniture \$500 and | \$1,200.00 | | \$1,200.00 | Va. Code Ann. § 34-26(2) Wife |
| | Furniture/items made by Mrs. Todd's father \$200 Line from Schedule A/B: 8.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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| | ending 8884) Line from Schedule A/B: 17.2 IRA: Roth IRA Retirement through UBS (Acct ending 8937)(Wife) Line from Schedule A/B: 21.2 Life Insurance through New York L Insurance Comapny (Whole Life Policy) (Husband) Beneficiary: Janet Todd Line from Schedule A/B: 31.1 Life Insurance through Mass Mutua Financial Group (Universal Life 206 Policy) (Wife) Beneficiary: Andrew J. Todd Line from Schedule A/B: 31.2 3. Are you claiming a homestead exempti | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | | \$750.00 | | \$450.00 | Va. Code Ann. § 34-26(4) |
| | Line nom Schedule A/B. | | | 100% of fair market value, up to any applicable statutory limit | |
| | | \$15,000.00 | | \$13,000.00 | Va. Code Ann. § 34-26(1a) |
| | Ente nom concede 702. 1211 | | | 100% of fair market value, up to any applicable statutory limit | |
| | • | \$500.00 | | \$500.00 | Va. Code Ann. § 34-26(2) |
| | 11001110100 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking Account: C & F Bank (Acct | \$904.28 | | \$452.14 | Va. Code Ann. § 34-4 |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | | \$29,376.00 | | \$29,376.00 | 11 U.S.C. §522(n) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Life Insurance through New York Life | \$5,694.76 | | \$4,275.39 | Va. Code Ann. § 34-4 Wife |
| | Policy) (Husband) Beneficiary: Janet Todd | | | 100% of fair market value, up to any applicable statutory limit | |
| | Life Insurance through Mass Mutual | \$772.47 | | \$772.47 | Va. Code Ann. § 34-4 Wife |
| | Policy) (Wife) Beneficiary: Andrew J. Todd | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 | | | iled on or after the date of adjustme | ent.) |
| | Yes. Did you acquire the property covere No | d by the exemption w | ithin 1 | ,215 days before you filed this case | ?? |
| | ☐ Yes | | | | |

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| | | Document | Page 1 | .7 of 44 | | |
|--|----------------|--|----------------|-----------------------|--|--------------------------|
| Fill in this information to ide | entify your | case: | | | | |
| | Drohan ' | | | | | |
| First Name | | Middle Name | Last Name | | | |
| Debtor 2 Janet L (Spouse if, filing) First Name | ea Todd | Middle Name | Last Name | | - | |
| (GP | | | | | | |
| United States Bankruptcy Co | urt for the: | EASTERN DISTRICT OF VIRG | INIA | | - | |
| Case number 16-30015 | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | ameno | ded filing |
| Official Forms 400D | | | | | | |
| Official Form 106D | | | | | | |
| Schedule D: Cred | ditors | Who Have Claims S | <u> Secure</u> | ed by Propert | У | 12/15 |
| | | two married people are filing together number the entries, and attach it to thi | | | | |
| 1. Do any creditors have claims s | secured by y | our property? | | | | |
| ☐ No. Check this box and | d submit th | is form to the court with your other | schedules. | You have nothing else | to report on this form. | |
| ■ Yes. Fill in all of the in | formation b | pelow. | | | | |
| Part 1: List All Secured C | Claims | | | | | |
| | | ore than one secured claim, list the credit | tor separately | of Column A | Column B | Column C |
| each claim. If more than one cred | litor has a pa | rticular claim, list the other creditors in P r according to the creditor's name. | | | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Bank Of America | | Describe the property that secures th | e claim: | \$282,479.09 | \$810,000.00 | \$0.00 |
| Creditor's Name | | 12309 Country Creek Way GI | | | | |
| | | Allen, VA 23059 Henrico Co. 2015 Tax Assessment \$740,0 | | | | |
| | | Appraised Value per SunTru | | | | |
| P.O. Box 21848 | | \$810,000 | J. | | | |
| Greensboro, NC | | As of the date you file, the claim is: C | heck all that | | | |
| 27420-1818 | | apply. Contingent | | | | |
| Number, Street, City, State & Zi | p Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the debt? Check on | ne. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as m car loan) | ortgage or se | ecured | | |
| Debtor 2 only | | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ■ Debtor 1 and Debtor 2 only■ At least one of the debtors and | l another | ☐ Judgment lien from a lawsuit | ianio 3 non | | | |
| ☐ Check if this claim relates to | | 9 | Second M | lortgage | | |
| community debt | - | — Other (including a right to onset) | | | | |
| Date debt was incurred 04/10 | 6/2008 | Last 4 digits of account number | er <u>8399</u> | <u> </u> | | |
| O O Citimo estado es | | Describe the property that secures th | a alaim. | ¢220,000,00 | ¢040,000,00 | ¢0.00 |
| 2.2 Citimortgage Creditor's Name | | 12309 Country Creek Way GI | | \$230,000.00 | \$810,000.00 | \$0.00 |
| | | Allen, VA 23059 Henrico Co | | | | |
| | | 2015 Tax Assessment \$740,0 | | | | |
| | | Appraised Value per SunTru | st | | | |
| P.O. Box 6243 | | \$810,000 As of the date you file, the claim is: C | hock all that | | | |
| Sioux Falls, ND | | apply. | HECK All that | | | |
| 57117-6243 | | Contingent | | | | |
| Number, Street, City, State & Zi | p Code | ☐ Unliquidated | | | | |
| Who owes the debt? Check on | ne. | Disputed Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as m | nortgage or se | ecured | | |
| Debtor 2 only | | car loan) | 5 5 - 5- | | | |
| ■ Debtor 1 and Debtor 2 only | | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ At least one of the debtors and | another | ☐ Judgment lien from a lawsuit | | | | |

Official Form 106D

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| Debtor 1 | | rohan Todd | | _ | Case number (if know) | 16-30015 | |
|---------------|--------------------------------|---------------------|--|-----------------|--|--------------|--------------|
| Dahtano | First Name | Middle N | ame Last Name | | | | |
| Debtor 2 | Janet Lea First Name | Todd Middle N | ame Last Name | _ | | | |
| | Tilotiname | Wilddle 14 | ane Last Name | | | | |
| | if this claim re unity debt | lates to a | Other (including a right to offset) | First Mor | tgage | | |
| Date debt | was incurred | 10/10/2003 | Last 4 digits of account num | ber <u>4374</u> | <u>. </u> | | |
| | nTrust Banl | k | Describe the property that secures | the claim: | \$873,037.60 | \$810,000.00 | \$575,516.69 |
| Cred | itor's Name | | 12309 Country Creek Way C Allen, VA 23059 Henrico Co 2015 Tax Assessment \$740 Appraised Value per SunTr \$810,000 | ounty ,000 | | | |
| _ | D. Box 3051 shville, TN | | As of the date you file, the claim is: apply. | Check all that | | | |
| | ber, Street, City, S | | ☐ Contingent☐ Unliquidated | | | | |
| | s the debt? C | · | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ☐ Debtor | 1 only | rieck one. | ☐ An agreement you made (such as | mortgage or se | ecured | | |
| Debtor | • | | car loan) | | | | |
| _ | 1 and Debtor 2 | - , | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| _ | | tors and another | ☐ Judgment lien from a lawsuit | This at Man | -4 | | |
| | if this claim re unity debt | lates to a | Other (including a right to offset) | Third Mo | rtgage | | |
| Date debt | was incurred | 12-6-2010 | Last 4 digits of account num | ber <u>1104</u> | <u> </u> | | |
| 2.4 US | Bankcorp | | Describe the property that secures | the claim: | \$18,413.85 | \$12,286.00 | \$6,127.85 |
| Cred | itor's Name | | 2012 Volvo XC60 82,000 mi Average Condition Owners - Husband and Wife | 9 | | | |
| | Nicollet M | | As of the date you file, the claim is: apply. | Check all that | | | |
| | ber, Street, City, S | | ☐ Contingent☐ Unliquidated | | | | |
| 1401111 | oo., onoon, only, o | all a Lip Code | ☐ Disputed | | | | |
| Who owe | s the debt? C | heck one. | Nature of lien. Check all that apply. | | | | |
| ☐ Debtor | 1 only | | ☐ An agreement you made (such as | mortgage or se | ecured | | |
| ☐ Debtor | 2 only | | car loan) | | | | |
| Debtor | 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| At least | t one of the deb | tors and another | ☐ Judgment lien from a lawsuit | | | | |
| | if this claim re unity debt | lates to a | Other (including a right to offset) | Car Loan | 1 | | |
| Date debt | was incurred | 03/26/2012 | Last 4 digits of account num | ber <u>0973</u> | <u> </u> | | |
| | | | | | | | |
| Add the | dollar value of | Vour entries in Co | olumn A on this page. Write that numl | ner here | \$1,403,930 | 54 | |
| If this is | the last page of | of your form, add t | the dollar value totals from all pages. | | \$1,403,930 | | |
| Write the | at number bere | ٠- | · - | | ⊅1,4U3,93U | .J-t | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| Cc | 13C 10-30013-KKK | Document Document | Page 1 | nereu 01/23/10 17 9 ∩f ΔΔ | 04.00 | Desc Main |
|-------------------------------|---|--|---------------------|--------------------------------------|----------------|--|
| Fill in this i | information to identify your ca | | T duc 1 | 3 01 | | |
| Debtor 1 | Andrew Drohan To | | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Janet Lea Todd | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | | |
| United State | es Bankruptcy Court for the: | EASTERN DISTRICT OF VIE | RGINIA | | | |
| Case numb | er 16-30015 | | | | | |
| (if known) | | | | | | Check if this is an |
| | | | | | а | mended filing |
| Official F | Form 106E/F | | | | | |
| | le E/F: Creditors Wh | no Have Unsecured | d Claims | | | 12/15 |
| | ete and accurate as possible. Use I | | | art 2 for creditors with NONPR | IORITY claim | |
| he Continuat number (if kn | Who Have Claims Secured by Propition Page to this page. If you have own). List All of Your PRIORITY Uns | no information to report in a Par | | | | |
| 1. Do any o | creditors have priority unsecured of | claims against you? | | | | |
| ■ No. G | Go to Part 2. | | | | | |
| ☐ Yes. | | | | | | |
| Part 2: | ist All of Your NONPRIORITY | Unsecured Claims | | | | |
| 3. Do any o | creditors have nonpriority unsecur | red claims against you? | | | | |
| □ No. Y | ou have nothing to report in this part | t. Submit this form to the court with | your other sche | dules. | | |
| Yes. | | | | | | |
| claim, list | of your nonpriority unsecured clain t the creditor separately for each clain nolds a particular claim, list the other | m. For each claim listed, identify w | hat type of claim | it is. Do not list claims already in | cluded in Part | 1. If more than one on Page of Part 2. |
| | | | | | | Total claim |
| | nerican Express-Costco | Last 4 digits of ac | count number | 1013 | | \$3,906.33 |
| | priority Creditor's Name D. Box 650448 | When was the deb | ot incurred? | Date Opened: 01/1/20 | 11 | |
| | llas, TX 75265 | | | • | | - |
| | nber Street City State Zlp Code | As of the date you | ı file, the claim i | s: Check all that apply | | |
| _ | o incurred the debt? Check one. | ☐ Contingent | | | | |
| _ | Debtor 1 only Debtor 2 only | ☐ Unliquidated | | | | |
| _ | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and anoth | Type of NONPRIO | RITY unsecured | d claim: | | |
| | | - Student loans | | | | |
| | Check if this claim is for a commune claim subject to offset? | Inity debt Obligations aris report as priority cla | | ration agreement or divorce that | you did not | |
| ■ 1 | No | ☐ Debts to pension | n or profit-sharin | g plans, and other similar debts | | |
| | | | Credit Card | d | | |
| | Yes | Other. Specify | Last Used: | 01/1/2015 | | |

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| otor 2 Janet Lea Todd | | Case number (if know) | 16-30015 | |
|---|---|--|------------------|-------------|
| Bank Of America | Last 4 digits of account number | 4481 | _ | \$14,391.68 |
| Nonpriority Creditor's Name P.O. Box 150189 Wilmington, DE 19886 | When was the debt incurred? | Date Opened: 11/1 | /2013 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| Debtor 1 only | ☐ Unliquidated | | | |
| ■ Debtor 2 only | _ | | | |
| ☐ Debtor 1 and Debtor 2 only | ■ Disputed Type of NONPRIORITY unsecure | d claim: | | |
| ☐ At least one of the debtors and another | Student loans | u ciaiii. | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepreport as priority claims | aration agreement or divorce | that you did not | |
| ■ No | Debts to pension or profit-shari | ng plans, and other similar de | hts | |
| – NO | Credit care | d used for business e Venture Group | | |
| Yes | ■ Other. Specify Last Used | : 02/8/2014 | | |
| Bank Of America | Last 4 digits of account number | 9448 | | \$8,675.09 |
| Nonpriority Creditor's Name P.O. Box 15019 Wilmington, DE 19886 | When was the debt incurred? | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | , | | |
| ☐ Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | <u> </u> | | | |
| ☐ Debtor 1 and Debtor 2 only | ■ Disputed Type of NONPRIORITY unsecure | d claim: | | |
| ☐ At least one of the debtors and another | Student loans | u ciaiii. | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepreport as priority claims | aration agreement or divorce | that you did not | |
| ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar de | bts | |
| □ Yes | Credit care Other. Specify The Todd | d used for business e Venture Group | expenses of | |
| Cantey Hanger | Last 4 digits of account number | 6hwo 9171 | | \$46,001.52 |
| Nonpriority Creditor's Name | Last 4 digits of account number | 6bwa,8171 | _ | \$46,001.52 |
| 600 W 6th Street, Suite 300 Fort Worth, TX 76102 | When was the debt incurred? | 01/1/2015 | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | | |
| At least one of the debtors and another | ☐ Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepreport as priority claims | aration agreement or divorce | that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | bts | |
| Yes | ■ Other. Specify judgment | enses related to colle against Abrahamsen | ction of | |

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| ebtor 2 Janet Lea Todd | | | Case number (if know) | 16-30015 | |
|---|---|---------------------|--|------------------|-------------|
| 5 Chase Bank-Marriott Awards | Last 4 digits of ac | count number | 1252 | | \$11,050.01 |
| Nonpriority Creditor's Name P.O. Box 15123 Wilmington, DE 19850 | When was the del | ot incurred? | Date Opened: 01/1/ | /2000 | |
| Number Street City State Zlp Code | As of the date you | ı file, the claim i | is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | |
| Debtor 2 only | ☐ Disputed | | | | |
| ■ Debtor 1 and Debtor 2 only | Type of NONPRIC | RITY unsecure | d claim: | | |
| ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations aris | | aration agreement or divorce | that you did not | |
| No | Debts to pension | on or profit-sharin | g plans, and other similar del | bts | |
| | | | l used for business e Venture Group | expenses of | |
| Yes | Other. Specify | Last Used: | 09/8/2015 | | |
| CitiBank | Last 4 digits of ac | count number | 5988 | | \$9,029.14 |
| Nonpriority Creditor's Name P.O. Box 6062 Sioux Falls, SD 57117 | When was the del | ot incurred? | | | |
| Number Street City State Zlp Code | As of the date you | ı file, the claim i | is: Check all that apply | | |
| Who incurred the debt? Check one. | Continuent | | | | |
| Debtor 1 only | ☐ Contingent☐ Unliquidated☐ | | | | |
| Debtor 2 only | ☐ Disputed | | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIC | RITY unsecure | d claim: | | |
| ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations aris | | aration agreement or divorce | that you did not | |
| ■ No | Debts to pension | on or profit-sharin | g plans, and other similar del | bts | |
| ☐ Yes | Other. Specify | | l used for business e Venture Group | expenses of | |
| 7 Diane Todd | Last 4 digits of ac | count number | | | \$60,000.00 |
| Nonpriority Creditor's Name 155 Magnolia Avenue Glendale, OH 45246 | When was the del | ot incurred? | 01/1/2010 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you | ı file, the claim i | is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | □ Unliquidated | | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | Type of NONPRIC | RITY unsecure | d claim: | | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| Is the claim subject to offset? | ☐ Obligations aris report as priority class | | aration agreement or divorce | that you did not | |
| ■ No | ☐ Debts to pension | on or profit-sharin | g plans, and other similar del | bts | |
| ☐ Yes | ■ Other. Specify | purchase l | oans from mother of ousiness and for bus of The Todd Venture | iness | |

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| | or 2 Janet Lea Todd | | Case number (if know) | 16-30015 | |
|------|---|--|--|------------------|-------------|
| 4.8 | Discover | Last 4 digits of account number | 2459 | | \$15,006.18 |
| | Nonpriority Creditor's Name P.O. Box 71084 | When was the debt incurred? | /2003 | | |
| | Charlotte, NC 28272 Number Street City State Zlp Code | As of the date you file, the claim | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | a ciaiii. | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | hts | |
| | – NO | Credit care | d used for business e Venture Group | | |
| | Yes | ■ Other. Specify Last Used | : 01/1/2015 | | |
| 4.9 | Discover | Last 4 digits of account number | 4954 | | \$13,549.55 |
| | Nonpriority Creditor's Name P.O. Box 71084 | When was the debt incurred? | Date Opened: 01/1 | /2003 | |
| | Charlotte, NC 28272 | | Bate openiou. 0171 | 12000 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | bts | |
| | | | d used for business e Venture Group | expenses of | |
| | Yes | ■ Other. Specify Last Used | : 01/1/2015 | | |
| 4.10 | Faegre Baker Daniels Nonpriority Creditor's Name | Last 4 digits of account number | | | \$1,325.80 |
| | 2200 Wells Fargo Center 90 South Seventh Street Minneapolis, MN 55402 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | | |
| | \square At least one of the debtors and another | ☐ Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | ebts | |
| | □Yes | ■ Other. Specify Legal expe | enses to pursue colle en judgment | ection of | |

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Debtor 1 Andrew Drohan Todd

| Debtor | 2 Janet Lea Todd | | Case number (if know) | 16-30015 | |
|--------|---|--|--|------------------|--------------|
| 4.11 | John Icke Nonpriority Creditor's Name | Last 4 digits of account number | | _ | \$100,000.00 |
| | 3214 Lake Mendota Drive Madison, WI 53705 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | a ciaiii. | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a sepa | ration agreement or diverse | that you did not | |
| | Is the claim subject to offset? | report as priority claims | iration agreement or divorce | inat you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar del | bts | |
| | ☐Yes | used to pu | pans from father of M rchase business and expenses of The Todo | l for | |
| 4.12 | McCandlish Holton | Last 4 digits of account number | 0001 | _ | \$247,805.66 |
| | Nonpriority Creditor's Name 1111 East Main Street, #2100 Richmond, VA 23218 | When was the debt incurred? | 01/1/2014 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar del | bts | |
| | Yes | | egal expenses relate against Abrahamser | | |
| 4.13 | US Bank | Last 4 digits of account number | 5203 | _ | \$7,737.87 |
| | Nonpriority Creditor's Name P.O. Box 790408 St Louis, MO 63179 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | <u> </u> | ☐ Contingent | | | |
| | Debtor 1 only | ☐ Unliquidated | | | |
| | Debtor 2 only | ☐ Disputed | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | | |
| | Check if this claim is for a community debt | Obligations arising out of a sepa | ration agreement or divorce | that you did not | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | | | |
| | Yes | ■ Other. Specify The Todd | I used for business e /enture Group | expenses of | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Andrew Drohan Todd

Debtor 2 Janet Lea Todd Case number (if know) 16-30015

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | - | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | | | | | |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | |
| | | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 538,478.83 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 538,478.83 |

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| | | Docume | | |
|---------------------|--------------------------|--------------------|------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Andrew Drohan T | odd | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Janet Lea Todd | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT O | F VIRGINIA | |
| Case number | 16-30015 | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 The Icke Revocable Trust | One year lease for residential property beginning November 15, 2015 and expires on November 15, 2016. The monthly lease payment is \$2,500. |

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| | | Document | Page 26 of 44 | |
|----------------------------|---|---|-------------------------------------|---|
| Fill in this | information to identify your case | | | |
| Debtor 1 | Andrew Drohan Todo | 1 | | |
| 20210 | First Name | Middle Name | Last Name | — |
| Debtor 2 | Janet Lea Todd | | | |
| (Spouse if, fili | ng) First Name | Middle Name | Last Name | |
| United Sta | ites Bankruptcy Court for the: EA | STERN DISTRICT OF VI | RGINIA | |
| Case num | ber 16-30015 | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | l Form 106H | | | |
| | | | | |
| Sched | lule H: Your Codeb | tors | | 12/15 |
| eople are ill it out, a | filing together, both are equally | responsible for supplying es on the left. Attach the | g correct information. If more s | nd accurate as possible. If two married pace is needed, copy the Additional Page, in the top of any Additional Pages, write |
| 1. Do | you have any codebtors? (If you a | are filing a joint case, do n | ot list either spouse as a codebtor | |
| □ No | | | | |
| ■ Yes | 3 | | | |
| | hin the last 8 years, have you live a, California, Idaho, Louisiana, Nev | | | y property states and territories include sconsin.) |
| ■ No. | Go to line 3. | | | |
| | s. Did your spouse, former spouse, | or legal equivalent live wit | h you at the time? | |
| in line Form | e 2 again as a codebtor only if tha | t person is a guarantor | or cosigner. Make sure you have | se is filing with you. List the person showr listed the creditor on Schedule D (Officia edule D, Schedule E/F, or Schedule G to |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZIP Cod | е | | The creditor to whom you owe the debt schedules that apply: |
| 3.1 | The Todd Venture Group | | ☐ Sched | ule D, line |
| | · | | | ule E/F, line 4.12 |
| | | | □ Sched | |
| | | | | ish Holton |
| | | | | |
| 3.2 | The Todd Venture Group | | ☐ Sched | ule D, line |
| | | | | ule E/F, line 4.1 |
| | | | □ Cahad | ulo C |

American Express-Costco

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| Debt | or 1 | Andrew Dro | han Todd | | |
|---|--|---|---|--|--|
| Debt (Spous | or 2 se, if filing) | anet Lea To | odd | | |
| Unite | ed States Bankruptcy | Court for the | EASTERN DISTRICT | OF VIRGINIA | |
| | number 16-30 | 015 | | _ | Check if this is: |
| (If kno | wn) | | | | □ An amended filing □ A supplement showing postpetition chapter 13 income as of the following date: |
| Off | icial Form 1 | <u>06I</u> | | | MM / DD/ YYYY |
| _ | | | | | |
| Be as suppl spou | lying correct inform se. If you are separa | urate as poss nation. If you ated and you | sible. If two married pec are married and not fili ir spouse is not filing w | ng jointly, and your spouse is livin ith you, do not include information | nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed ase number (if known). Answer every question |
| Be as supples spous attacled Part | complete and accu lying correct inform se. If you are separa n a separate sheet t | urate as possination. If you ated and you to this form. | sible. If two married pec are married and not fili ir spouse is not filing w | ng jointly, and your spouse is livin ith you, do not include information | nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed |
| Be as suppl spous attacl Part | complete and acculying correct informse. If you are separate a separate sheet the Describe E | urate as poss nation. If you ated and you to this form. (Employment ment | sible. If two married pec are married and not fili ir spouse is not filing w On the top of any additi | ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and c | nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed ase number (if known). Answer every question |
| Be as supplispous attacl Part | complete and accurate ying correct information. se. If you are separate a separate sheet the separate sheet sh | urate as poss nation. If you ated and you to this form. (Employment ment an one job, age with | sible. If two married pec are married and not fili ir spouse is not filing w | ng jointly, and your spouse is livin ith you, do not include information ional pages, write your name and control of the page | nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed ase number (if known). Answer every question Debtor 2 or non-filing spouse |
| Be assupplespousattacl Part 1. | complete and accupying correct information. 1: Describe E Fill in your employing information. If you have more that attach a separate parate parate. | urate as poss nation. If you ated and you to this form. (Employment ment an one job, age with | sible. If two married pec are married and not fili ir spouse is not filing w On the top of any additi | ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and control of the page o | nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed asse number (if known). Answer every question Debtor 2 or non-filing spouse |
| Be as supplispous attacl Part | complete and accupying correct information. 1: Describe E Fill in your employing information. If you have more that attach a separate pain accupy and accupy accupy and accupy and accupy and accupy and accupy and accupy accupy accupy and accupy accupy accupy accupy and accupy accup | urate as poss nation. If you ated and you to this form. If Employment ment an one job, age with diditional | sible. If two married pec are married and not fili ir spouse is not filing w On the top of any additi | ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and complete the page of | nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed asse number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed |
| Be as ssuppl sspous attacl Part | complete and acculying correct informse. If you are separate a separate sheet the Describe Eill in your employing information. If you have more that attach a separate painformation about ad employers. Include part-time, see | urate as poss nation. If you ated and you to this form. Of Employment ment an one job, age with idditional easonal, or | sible. If two married pec are married and not fili ir spouse is not filing w On the top of any additi Employment status | pebtor 1 Employed Not employed Vice President | Debtor 2 or non-filing spouse Employed Not employed President |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

| filing spouse | non- | | | |
|---------------|------|------|-----|----|
| 3,800.00 | \$ | 0.00 | \$ | 2. |
| 0.00 | +\$_ | 0.00 | +\$ | 3. |
| 3,800.00 | \$ | 0.00 | \$ | 4. |

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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| Debtor 2 | | | Case n | umber (<i>if known</i>) | 16-30015 | | |
|----------------|--|---------------------------|------------------|---------------------------|----------------------|----------------------------|-----------------|
| | any line A hore | 4 | For I | Debtor 1 | For Debtor | spouse | |
| C | opy line 4 here | 4. | Φ | 0.00 | Φ <u> </u> | ,800.00 | - |
| 5. Li | st all payroll deductions: | | | | | | |
| 58 | · | 5a. | \$ | 0.00 | \$ | 568.76 | _ |
| 5k | , | 5b. | \$ | 0.00 | \$ | 0.00 | _ |
| 50 | · · | 5c. | \$ | 0.00 | \$ | 0.00 | _ |
| 50 | , , , | 5d. | \$ | 0.00 | \$ | 0.00 | _ |
| 56 | | 5e. | \$ | 0.00 | \$ | 431.38 | _ |
| 5f 5g | 3 | 5f. 5g. | \$ | 0.00 | \$ \$ | 0.00 | _ |
| 5(5h | | 5g. 5h.+ | · : — | 0.00 | · : — — — | 200.00 | _ |
| | dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | ¢ | 0.00 | · | ,200.14 | _ |
| | alculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | · | , <u>200.14</u> ,599.86 | - |
| | st all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | · | | | | - |
| | monthly net income. | 8a. | \$ | 5,000.00 | \$ \$ | 0.00 | _ |
| 8k 8d | | 8b. e nt 8c. | \$ \$ | 0.00 | \$\$ | 0.00 | - |
| 80 | | 8d. | \$ | 0.00 | \$ | 0.00 | _ |
| 86 | • • | 8e. | \$ | 0.00 | \$ | 0.00 | _ |
| 8f 8ç 8l | Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | nce 8f. 8g. 8h.+ | \$ \$ + \$ | 0.00 0.00 0.00 | \$ \$ + \$ | 0.00 0.00 0.00 | - |
| 9. A | dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 5,000.00 | \$ | 332.8 | 9 |
| | alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | 5 | ,000.00 + \$ | 2,932.75 | = \$ | 7,932.75 |
| In ot D | rate all other regular contributions to the expenses that you list in Schedic clude contributions from an unmarried partner, members of your household, you her friends or relatives. In not include any amounts already included in lines 2-10 or amounts that are not pecify: | our deper | • | • | ted in <i>Schedu</i> | le J. +\$ | 0.00 |
| W | dd the amount in the last column of line 10 to the amount in line 11. The rite that amount on the Summary of Schedules and Statistical Summary of Cepplies | | | | | \$ | 7,932.75 |
| 13. D | o you expect an increase or decrease within the year after you file this for | m? | | | | Combi month | ned y income |
| • | | | on on ' | 1-4-2016. It is | not yet cor | firmed | that the |

Official Form 106I Schedule I: Your Income page 2

| Fill | in this informa | ation to identify y | our case: | · | | | | |
|------|----------------------------|---|----------------|--|--|-------------|------------------|--|
| Deb | otor 1 | Andrew Dro | han Todd | I | | Che | eck if this is: | |
| | otor 2 ouse, if filing) | Janet Lea To | odd | | | | | wing postpetition chapter the following date: |
| `` | | runtey Court for the | · FASTE | RN DISTRICT OF VIRGIN | ΙΙΔ | | MM / DD / YYYY | |
| | | | . LAOTE | THE PROPERTY OF VINCEN | | | WIWI / DD / TTTT | |
| | se number 16 nown) | 6-30015 | | | | | | |
| O | fficial Fo | orm 106J | | | | | | |
| S | chedule | J: Your | Expen | ises | | | | 12/15 |
| info | ormation. If m | | eeded, atta | . If two married people and the state of the | | | | |
| Par | | ribe Your House | ehold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | | =. | in a separ | ate household? | | | | |
| | ■ N □ Y | | st file Offici | ial Form 106J-2, <i>Expense</i> : | s for Separate Hous | ehold of De | ebtor 2. | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list D | | ■ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | Son | | 15 | □ No ■ Yes |
| | | | | | Daughter | | 23 | ■ No |
| | | | | | Daugittei | | | □ Yes □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No □ Yes |
| 3. | expenses o | penses include of people other t d your depende | than 🗖 | No Yes | | | | □ Tes |
| Est | imate your ex | a date after the | our bankrı | uptcy filing date unless y | | | | apter 13 case to report of the form and fill in the |
| the | | h assistance ar | | government assistance i cluded it on <i>Schedule I:</i> ` | | | Your exp | enses |
| 4. | | or home owners and any rent for th | | ses for your residence. I | nclude first mortgag | je 4. | \$ | 2,500.00 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 300.00 |
| | 4b. Prope | erty, homeowner' | | | | 4b. | \$ | 100.00 |
| | | e maintenance, re eowner's associa | | upkeep expenses dominium dues | | 4c. 4d. | · ——— | 300.00 20.00 |
| 5. | | | | our residence, such as ho | me equity loans | 4a. 5. | · | 0.00 |

Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main Document Page 30 of 44

| | otor 1 Andrew Drohan Todd otor 2 Janet Lea Todd | Case number (if known) | 16-30015 |
|-----|--|------------------------|------------------------------|
| DOD | Janet Lea Todu | Case number (ii known) | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. \$ | 500.00 |
| | 6b. Water, sewer, garbage collection | 6b. \$ | 50.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 300.00 |
| | 6d. Other. Specify: | 6d. \$ | 0.00 |
| 7. | Food and housekeeping supplies | 7. \$ | 1,000.00 |
| 8. | Childcare and children's education costs | 8. \$ | 1,500.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. \$ | 200.00 |
| 10. | Personal care products and services | 10. \$ | 150.00 |
| 11. | Medical and dental expenses | 11. \$ | 300.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | |
| | Do not include car payments. | 12. \$ | 300.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 500.00 |
| 14. | Charitable contributions and religious donations | 14. \$ | 200.00 |
| 15. | Insurance. | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | • | |
| | 15a. Life insurance | 15a. \$ | 248.00 |
| | 15b. Health insurance | 15b. \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. \$ | 160.00 |
| | 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. \$ | 0.00 |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. \$ | 616.00 |
| | 17b. Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| | 17c. Other. Specify: | 17c. \$ | 0.00 |
| | 17d. Other. Specify: | 17d. \$ | 0.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report | | 0.00 |
| 40 | deducted from your pay on line 5, Schedule I, Your Income (Official Form 10 | | |
| 19. | Other payments you make to support others who do not live with you. | \$ | 0.00 |
| 20 | Specify: Other real property expenses not included in lines 4 or 5 of this form or on 5 | 19. | |
| 20. | 20a. Mortgages on other property | 20a. \$ | 0.00 |
| | 20b. Real estate taxes | 20b. \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20d. \$ | 208.00 |
| 24 | | · — | |
| ۷١. | Other: Specify: Dominion Club | 21+\$ | 550.00 |
| 22. | Calculate your monthly expenses | | |
| | 22a. Add lines 4 through 21. | \$ | 10,002.00 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106. | J-2 \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 10,002.00 |
| | , , , | | 10,002100 |
| 23. | Calculate your monthly net income. | | |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 7,932.75 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 10,002.00 |
| | 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. \$ | -2,069.25 |
| 24. | Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? ■ No. □ Yes. Explain here: | | ase or decrease because of a |

Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main Document Page 31 of 44

| Fill in this inform | nation to identify your | case: | | | |
|---------------------------------------|---|--------------------------|--------------------------------|--------------------|--|
| Debtor 1 | Andrew Drohan T | odd | | | |
| 200101 | First Name | Middle Name | Last Name | | |
| Debtor 2 | Janet Lea Todd | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | EASTERN DISTRICT O | F VIRGINIA | | |
| | 16-30015 | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official Forn | | | | | |
| Declarat | ion About a | n Individual | Debtor's Sche | dules | 12/15 |
| obtaining money years, or both. 18 | | n connection with a bank | | | ement, concealing property, or 10, or imprisonment for up to 20 |
| Did you pay | y or agree to pay some | one who is NOT an attori | ney to help you fill out bankr | uptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | lame of person | | | | kruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | ty of perjury, I declare true and correct. | that I have read the sum | mary and schedules filed wit | h this declaration | on and |
| X /s/ And | rew Drohan Todd | | X /s/ Janet Lea To | odd | |
| | v Drohan Todd | | Janet Lea Todo | | |

Signature of Debtor 2

Date **January 29, 2016**

Signature of Debtor 1

Date **January 29, 2016**

Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main Document Page 32 of 44

| No | E 11 : | n thin info | emation to identify you | | | | | | | | |
|--|----------|----------------|--|---------------------------------|--------------------------------|---------------------------------|-------------------------|--|--|--|--|
| Debtor 2 Janet Lea Todd First Name Lasir | | | | | | | | | | | |
| United States Bankruptory Court for the: EASTERN DISTRICT OF VIRGINIA Case number 16-30015 If financer) | Debt | or 1 | | | Last Name | | | | | | |
| United States Bankruptcy Court for the: | | | | | | | | | | | |
| Case number 16-30015 Check if this is an amended filing | (Spous | se if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 2011 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? Poss. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Artzona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply: Gross income Check all that apply: Bounds of income Check all that | Unite | ed States B | ankruptcy Court for the: | EASTERN DISTRICT OF | VIRGINIA | | | | | | |
| Difficial Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 2art 18 Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married Not married Not married Debtor 1 Prior Address: Dates Debtor 1 Ilved there Within the last 3 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H. Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Debtor 1 Sources of income check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Sources of income Check all that apply. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Check all that apply. Debtor 9 Wages, commissions, bonuses, tips | Case | number | 16-30015 | | | | | | | | |
| Difficial Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more repeated and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more repeated and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more repeated and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct filing the place of t | (if know | wn) | | | | | | | | | |
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| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 2art 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Inved there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Port 2 Explain the Sources of Your Income Did you have any income from employment or from operating a businessed, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. | | | | Affaira far Individ | luala Eilina far D | onkruntov | 40/4 | | | | |
| Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married | | | | | | | | | | | |
| What is your current marital status? | | | | | | | | | | | |
| Married Married Not married | | | | | | , pg , , . | | | | | |
| Married Not married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 3 Poets Debtor 4 Prior Address: Dates Debtor 4 Poets Debtor 5 Prior Address: Dates Debtor 6 Poets Debtor 6 Prior Address: Dates Debtor 7 Prior Address: Dates Debtor 9 Poets Debtor 9 Prior Address: Dates Debtor | Part | 1: Give | Details About Your Ma | arital Status and Where You | ı Lived Before | | | | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Chock all that apply. Check all that apply. Sources, tips Sour | 1. V | What is yo | ur current marital statu | ıs? | | | | | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Chock all that apply. Check all that apply. Sources, tips Sour | | | | | | | | | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No | , , | _ | | | | | | | | | |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips \$45,600.00 | _ | | | Bard amount are after them. | | | | | | | |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there | 2. [| Juring the | no last o years, have you have anywhere outer than where you live now: | | | | | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 3 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 6 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debto | ı | No | | | | | | | | | |
| Lived there | [| ☐ Yes. L | ist all of the places you | lived in the last 3 years. Do n | ot include where you live nov | V. | | | | | |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | | Debtor 1 F | Prior Address: | | Debtor 2 Prior Ad | dress: | | | | | |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | 3. V | Nithin the | last 8 years, did you ey | ver live with a spouse or le | gal equivalent in a commu | nity property state or territor | 'v? (Community property | | | | |
| Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Check all that apply. Wages, commissions, bonuses, tips \$45,600.00 | | | | | | | | | | | |
| Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Check all that apply. Wages, commissions, bonuses, tips \$45,600.00 | | No | | | | | | | | | |
| Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Sources of income Check all that apply. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Debtor 2 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income Check all that apply. Sources of income Check all that apply. | | _ | lake sure you fill out Sci | hedule H: Your Codebtors (O | fficial Form 106H). | | | | | | |
| Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions) Possincome Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | | | • | · | , | | | | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pestor 1 Sources of income Check all that apply. Check all that apply. Pestor 2 Sources of income (before deductions and exclusions) Check all that apply. Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | Part | 2 Expl | ain the Sources of You | r Income | | | | | | | |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips | F | Fill in the to | tal amount of income yo | ou received from all jobs and | all businesses, including part | time activities. | ndar years? | | | | |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips | Г | □ No | | | | | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) Sources of income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | i | | ill in the details. | | | | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) Sources of income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | | | | D.L. | | D.I. | | | | | |
| Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$45,600.00 | | | | | Grass income | | Grass income | | | | |
| (Joint) bonuses, tips bonuses, tips | | | | | (before deductions and | | (before deductions | | | | |
| | | _ | ate Gross Income | | \$0.00 | | \$45,600.00 | | | | |
| ☐ Operating a business ☐ Operating a business | | | | ☐ Operating a business | | ☐ Operating a business | | | | | |

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Andrew Drohan Todd 16-30015 Case number (if known) Debtor 2 Janet Lea Todd Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) 2014 Gross Income (Wife) \$0.00 \$46,700.00 ☐ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business 2013 Gross Income (Wife) \$0.00 \$47,500.00 ☐ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) From January 1 of current year until **Owners Distributions** \$0.00 the date you filed for bankruptcy: (Husband) \$0.00 Distributions from \$0.00 Icke Liquidating (Wife) For last calendar year: Owners Distributions \$48,930.00 (January 1 to December 31, 2015) (Husband) **Brokerage Account** \$40,913.63 (Husband) \$0.00 Year to Date \$3,994.68 **Distributions from** Icke Liquidating (Wife) For the calendar year before that: **Owners Distributions** \$76,053.00 (January 1 to December 31, 2014) (Husband) **Brokerage Account** \$4,884.00 (Husband) \$0.00 **Distributions from** \$3,800.00 Icke Liquidating (Wife)

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| | | ndrew Dro net Lea To | | | Cas | se number (if known) | 16-30015 | | | | |
|----|--|--|---|---|---|--|--|--|--|--|--|
| Pa | rt 3: Lis | t Certain Pa | ayments You Made Be | fore You Filed for Bankru | ptcy | | | | | | |
| 6. | | | | primarily consumer debts | | | | | | | |
| • | ■ No. | Neither De | ebtor 1 nor Debtor 2 h | • | ebts. Consumer deb | ts are defined in 11 | U.S.C. § 101(8) as "incurred by ar | | | | |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. | | | | | | | | | |
| | | ■ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you | | | | | | | | | |
| | | paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | | | |
| | ☐ Yes. | Debtor 1 | or Debtor 2 or both ha | ve primarily consumer de d for bankruptcy, did you p | ebts. | | · | | | | |
| | | □ _{No.} | Go to line 7. | | | | | | | | |
| | | ☐ Yes | List below each credi | domestic support obligation | | | you paid that creditor. Do not Also, do not include payments to | | | | |
| | Creditor | 's Name and | d Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for | | | | |
| | P.O. Bo | an Expres x 650448 TX 75265 | s-Costco | 10/13/2015 and 12/11/2015 | \$8,848.17 | \$3,906.33 | ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other | | | | |
| | 12829 F | tine Colleg River Road J, VA 2323 | | 10/5/2015 and 12/10/2015 | \$6,465.48 | \$3,232.74 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other School Tuition | | | | |
| 7. | 7. Within 1 year before you filed for bankrup Insiders include your relatives; any general p corporations of which you are an officer, dire including one for a business you operate as a support and alimony. No Yes. List all payments to an insider | | artners; relatives of any ger ctor, person in control, or ov | neral partners; partn wner of 20% or more | erships of which your of their voting sec | ou are a general partner; curities; and any managing agent, | | | | | |
| | Insider's | Name and | Address | Dates of payment | Total amount | Amount you | Reason for this payment | | | | |
| 8. | insider? Include pa | ayments on | you filed for bankrup debts guaranteed or co | | paid ments or transfer | still owe | ccount of a debt that benefited a | | | | |
| | | Name and | | Dates of payment | Total amount | Amount you | Reason for this payment | | | | |
| | | | | | paid | still owe | Include creditor's name | | | | |
| Pa | rt 4: Ide | ntify Legal | Actions, Repossessio | ns, and Foreclosures | | | | | | | |

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main Document Page 35 of 44

| | otor 1 Andrew Drohan Todd otor 2 Janet Lea Todd | Document F | Case number (| if known) 16 | -30015 | |
|-----|---|--|--|----------------------|---------------------------------|-----------------------|
| | modifications, and contract disputes. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | Sta | atus of the | case |
| | SunTrust Bank v. The Todd Venture Group, Inc., Janet L. Todd and Andrew D. Todd CL15-2447-00 | Motion for Default Judgment Hearing 12-11-15 at 9:30 am | Henrico County Circuit Court 4301 East Parham Road Henrico, VA 23273-0775 | | Pending On appea Conclude | |
| | The Todd Venture Group, Inc., Andrew J. Todd and Janet L. Todd v. Kurt G. Abrahamsen, Linda L. Abrahamsen, et al. CL14-937 | Civil Judgment | Chesterfield County Circ Court | □ ■ Fir | | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No Yes. Fill in the information below. | | erty repossessed, foreclosed, | , garnished, | , attached, | seized, or levied? |
| | Creditor Name and Address | Describe the Property Explain what happened | ı | Date | | Value of the property |
| 11. | | | | mounts from your | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date actio | on was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes | | erty in the possession of an a | ssignee for | the benef | fit of creditors, a |
| Par | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift. | tcy, did you give any gifts | s with a total value of more th | nan \$600 pe | er person? | |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and | Describe the gifts | | Dates you the gifts | gave | Value |
| | Address: | | | | | |
| 14. | Within 2 years before you filed for bankrup □ No • Yes. Fill in the details for each gift or con- | | s or contributions with a tota | I value of m | ore than \$ | 600 to any charity |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | ı contributed | Dates you contribute | | Value |

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| | otor 1 Andrew Drohan Todd Janet Lea Todd | | Case number | er (if known) 16-30015 | |
|-----|---|-----------|---|---|---------------------------|
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | | Describe what you contributed | Dates you contributed | Value |
| | Hope Church 12445 Patterson Avenue Richmond, VA 23238 | | Donations to the church during the last year of approximately \$1,000 | During the last year | \$1,000.00 |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankr disaster, or gambling? | uptcy or | since you filed for bankruptcy, did you lose ar | nything because of the | ft, fire, other |
| | ■ No □ Yes Fill in the details. | | | | |
| | | | | | |
| | Describe the property you lost and how the loss occurred | Include | the any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B: | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfe | • | 9. | | |
| | ☐ No ☐ Yes. Fill in the details. Person Who Was Paid Address Email or website address | | rs, or credit counseling agencies for services requi Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Person Who Made the Payment, if Not | You | | made | |
| | Sands Anderson PC 1111 East Main Street, Suite 2400 P.O. Box 1998 Richmond, VA 23218-1998 Richmond, VA 23218-1998 | | Legal Fees and Costs related to workout and Chapter 7 Representation | October 2015 | \$28,206.00 |
| | The Mesquite Group, Inc. P.O. Box 54006 Hurst, TX 76054-4006 www.themesquitegroup.org | | Credit Counseling Course | 10-5-2015 | \$24.00 |
| 17. | Within 1 year before you filed for bankr promised to help you deal with your cru Do not include any payment or transfer the | editors o | | y or transfer any prope | rty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

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| Deb | otor 2 Janet Lea Todd | | Cas | e number (if known) | 16-30015 | |
|-----|--|-----------------------------------|---|--|--|---|
| 18. | Within 2 years before you filed for bankrup transferred in the ordinary course of your linelude both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details. | fairs? s the granting of a sec | | | | |
| | Person Who Received Transfer Address | Description and property transfe | rred | Describe any prop payments receive paid in exchange | | Date transfer was made |
| | Person's relationship to you Abigail Todd 1480 Harvard Street, #2 Washington, DC 20009 | Transferred 20 Element to dat | | | | June 2015 |
| | Daughter | | | , , | | |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-pri No Yes. Fill in the details. | rotection devices.) | ,, , | | milar device | , |
| | Name of trust | Description and | value of the property | / transferred | | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, In | nstruments, Safe Depos | sit Boxes, and Storag | e Units | | |
| 20. | Within 1 year before you filed for bankrupte sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | or other financial acco | unts; certificates of c | deposit; shares in The property of the proper | banks, cred | t unions, brokerage Last balance before closing or |
| | Code | | | moved, or transferred | l | transfer |
| | UBS 951 East Byrd Street Suite 520 Richmond, VA 23219 | XXXX-7976 | ☐ Checking ☐ Savings ☐ Money Market ■ Brokerage ☐ Other | Account of September Final Balaren Brokrager account we collateral equity line for busine related expenses liquidated stocks in account the satisfy load balance. Used by Desire for living expenses | er 2015 ance \$0 e vas for e used ess . UBS I the the o an Surplus bebtors | \$0.00 |
| | SunTrust Bank Richmond, VA | xxxx-9502 | ■ Checking □ Savings □ Money Market □ Brokerage □ Other | Account of in December 2015 | | \$73.00 |

Debtor 1 Andrew Drohan Todd

| 5. | | Andrew Broken Todd | DOC 19 | Document Page 38 | of 44 | 54.53 De | SC Main |
|-------|----------------|---|-----------------|--|-------------------------|-------------------|-----------------------|
| | tor 1 tor 2 | Andrew Drohan Todd Janet Lea Todd | | | Case number (if known) | 16-30015 | |
| | • | ou now have, or did you have n, or other valuables? | within 1 year | before you filed for bankruptcy, | any safe deposit box or | other deposito | ry for securities, |
| | _ | No Yes. Fill in the details. | | | | | |
| | | ne of Financial Institution Iress (Number, Street, City, State and | ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the content | S | Do you still have it? |
| 22. | Have | you stored property in a stor | age unit or pl | ace other than your home within | 1 year before you filed | for bankruptcy | |
| | _ | No Yes. Fill in the details. | | | | | |
| | | ne of Storage Facility Iress (Number, Street, City, State and | ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the content | S | Do you still have it? |
| Par | 9: | Identify Property You Hold o | or Control for | Someone Else | | | |
| | | ou hold or control any proper omeone. | ty that someo | ne else owns? Include any prop | erty you borrowed from, | , are storing for | , or hold in trust |
| | | No Yes. Fill in the details. | | | | | |
| | | ner's Name Iress (Number, Street, City, State and | ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | y | Value |
| Par | 10: | Give Details About Environn | nental Informa | ation | | | |
| For t | he p | urpose of Part 10, the followir | ng definitions | apply: | | | |
| | toxic | substances, wastes, or mate | rial into the a | local statute or regulation conce ir, land, soil, surface water, grou ostances, wastes, or material. | • | • | |
| | | means any location, facility, o wn, operate, or utilize it, includ | | defined under any environmenta sites. | al law, whether you now | own, operate, | or utilize it or used |
| | | ardous material means anythio Irdous material, pollutant, con | • | mental law defines as a hazardo similar term. | us waste, hazardous su | bstance, toxic s | substance, |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

Governmental unit

ZIP Code)

No ☐ Yes. Fill in the details. Environmental law, if you Name of site Governmental unit Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Environmental law, if you

Address (Number, Street, City, State and

know it

Name of site

Address (Number, Street, City, State and ZIP Code)

Date of notice

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Debtor 1 Andrew Drohan Todd
Debtor 2 Janet Lea Todd

Case number (if known) 16-30015

| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | |
|-------|---|--|--------------------------------|--|--------------------------|---------------------------------------|--------------------------------|-------------------------|--------------------|
| | | No Yes. Fill in the details. | | | | | | | |
| | | se Title se Number | Na Ac | ourt or agame ddress (No ate and ZIP (| umber, Street, City, | Nature | of the c | ase | Status of the case |
| Par | 111 | Give Details About Your Business or | Connect | tions to A | Any Business | | | | |
| 27. | Wit | hin 4 years before you filed for bankrup | tcy, did y | ou own a | a business or have ar | ny of the | followi | ng connections to any | business? |
| | | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | | ☐ A member of a limited liability com | pany (LL | C) or limi | ited liability partnersh | hip (LLP) |) | | |
| | | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | | ■ An owner of at least 5% of the votin | ng or equ | ity secur | ities of a corporation | 1 | | | |
| | | No. None of the above applies. Go to | Part 12. | | | | | | |
| | | Yes. Check all that apply above and fil | II in the d | letails be | low for each busines | ss. | | | |
| | Business Name | | Descril | be the na | ture of the business | | Employer Identification number | | |
| | | Address (Number, Street, City, State and ZIP Code) | | of accour | ntant or bookkeeper | Do not include Social Security number | | number or ITIN. | |
| | | | D : 4 !! | | | | | iness existed | |
| | The Todd Venture Group, Inc. 11625 Busy Street Richmond, VA 23236 Snap Office Supplies, LLC | | | Distributor of point-of-sale business products | EI | IN: | 27-3664786 | | |
| | | | | | | Fr | rom-To | 12-10-2010 to 12-3 | 1-2015 |
| | | | Distributor of office supplies | | EI | IN: | 47-5001573 | | |
| | | | | | | Fr | rom-To | 1-4-2016 to Presen | t |
| 28. | | hin 2 years before you filed for bankrup itutions, creditors, or other parties. | tcy, did y | ou give a | a financial statement | to anyo | ne abou | t your business? Inclu | ıde all financial |
| | | Yes. Fill in the details below. | | | | | | | |
| | Na | me | Date Is | sued | | | | | |
| | | dress mber, Street, City, State and ZIP Code) | | | | | | | |
| | SunTrust Special Assets 245 Town Park Drive Kennesaw, GA 30144 Debtors provided quarterly financial statements | | | | | | | | |
| Par | 12: | Sign Below | | | | | | | |
| are t | rue a ba | ead the answers on this Statement of Fi and correct. I understand that making a ankruptcy case can result in fines up to S. §§ 152, 1341, 1519, and 3571. | a false sta | atement, | concealing property, | or obtai | ining mo | oney or property by fra | |
| /s/ | And | Irew Drohan Todd | | /s/ Jan | et Lea Todd | | | | |
| An | drev | v Drohan Todd | | Janet L | Lea Todd | | | | |
| Sig | natu | re of Debtor 1 | | Signatu | re of Debtor 2 | | | | |
| Dat | е, | January 29, 2016 | | Date | January 29, 2016 | | | | |
| Did : | | attach additional pages to Your Statem | ent of Fil | nancial A | ffairs for Individuals | Filing fo | or Bankr | uptcy (Official Form 1 | 07)? |

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| Debtor 1 Debtor 2 | Andrew Drohan Todd Janet Lea Todd | Case number (if known) | 16-30015 |
|----------------------|--|---------------------------------|----------------|
| ☐ Yes | | | |
| Did you pa | ay or agree to pay someone who is not an attorney to help you fill out b | ankruptcy forms? | |
| ■ No | | | |
| Yes. Na | me of Person Attach the Bankruptcy Petition Preparer's Notice, De | claration, and Signature (Offic | ial Form 119). |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------|--------------------------|--------------------|-------------|--|---------------------|
| Debtor 1 | Andrew Drohan T | odd | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Janet Lea Todd | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | OF VIRGINIA | | |
| _ | 16-30015 | | | | |
| (if known) | | | | | Check if this is an |
| | | | , | | amended filing |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| identity the | creditor and the property that is collateral | secures a debt? | as exempt on Schedule C? | |
|--|--|--|--------------------------|--|
| Creditor's name: Description property securing de | Allen, VA 23059 Henrico | ■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ No □ Yes | |
| Creditor's name: Description property securing de | Allen, VA 23059 Henrico | ■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ No □ Yes | |

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| | | ew Drohan Todd t Lea Todd | Case number (if known) | 16-30015 |
|--------------|---|---|--|-----------------------------------|
| ! ! | Creditor's Suname: Description of property securing debt: | 12309 Country Creek Way Glen Allen, VA 23059 Henrico County 2015 Tax Assessment \$740,000 Appraised Value per SunTrust \$810,000 | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | ■ No □ Yes |
| | Creditor's U\$ name: | S Bankcorp | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| ı | Description of property securing debt: | 2012 Volvo XC60 82,000 miles Average Condition Owners - Husband and Wife | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |
| in ti You | ne information may assume | n below. Do not list real estate leases. U | I in Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2 | e lease period has not yet ended. |
| Les | ssor's name: | The Icke Revocable Trust | | □ No |
| Pro | scription of leas | expires on November 15, 2016 | property beginning November 15, 2015 and 6. The monthly lease payment is \$2,500. | ■ Yes |
| Und | | | ny intention about any property of my estate that see | cures a debt and any personal |
| х | /s/ Andrew | Drohan Todd | X /s/ Janet Lea Todd | |
| ^ | | ohan Todd | Janet Lea Todd | |
| | Signature of | Debtor 1 | Signature of Debtor 2 | |
| | Date Ja | nuary 29, 2016 | Date January 29, 2016 | |

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United States Bankruptcy Court
Eastern District of Virginia

| In re | Andrew Drohan Todd Janet Lea Todd | | Case No. | 16-30015 |
|-------|--------------------------------------|-----------|----------|----------|
| | | Debtor(s) | Chapter | 7 |

| | DISCLOSURE OF COMPENSATION OF ATTOR | NEY FO | OR DEBTOR | |
|----|--|----------------------------------|---------------------------------------|----|
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the compensation paid to me, for services rendered or to be rendered on behalf of the debt bankruptcy case is as follows: | | | |
| | For legal services, I have agreed to accept Prior to the filing of this statement I have received | \$ \$ | 28,206.00 | |
| | Balance Due | \$ <u> </u> | 0.00 | |
| 2. | \$336.00 of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: ✓ Debtor | | | |
| 4. | The source of compensation to be paid to me is: ✓ Debtor | | | |
| 5. | ✓ I have not agreed to share the above-disclosed compensation with any other person un ☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the compensation. | are not me | mbers or associates of my law firm. A | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. | | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not include the following see Representation of the debtors in any dischargeability actions, judicia any other adversary proceeding. | rvices: I l lien avo i | idances, relief from stay actions | or |

Case 16-30015-KRH Doc 18 Filed 01/29/16 Entered 01/29/16 17:34:53 Desc Main Document Page 44 of 44 **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

| January 29, 2016 | /s/ Roy M. Terry, Jr. |
|------------------|-----------------------------------|
| Date | Roy M. Terry, Jr. 17764 |
| | Signature of Attorney |
| | Sands Anderson PC |
| | Name of Law Firm |
| | 1111 East Main Street, Suite 2400 |
| | P.O. Box 1998 |
| | Richmond, VA 23218-1998 |

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,050 (For all Cases Filed on or after 1/01/2015)

804-648-1636 Fax: 804-783-7291

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED **STATES TRUSTEE** PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND **CLERK'S CM/ECF POLICY 9**

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

| | The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form | | |
|------|---|--|--|
| Date | Signature of Attorney | | |